

Image# 201611229037221171

PAGE 1 / 3

FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Comstock, Barbara, J, Honorable,		
(b) Address (number and street) PO Box 831		<input type="checkbox"/> Check if address changed
(c) City, State, and ZIP Code Mc Lean VA 22101		2. Candidate's FEC Identification Number H4VA10089
4. Party Affiliation REPUBLICAN PARTY		3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A)
5. Office Sought House	6. State & District of Candidate VA 10	

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2018 election(s).
(year of election)

NOTE: This designation should be filed with the appropriate office listed in the instructions.

(a) Name of Committee (in full) Comstock for Congress		
(b) Address (number and street) PO Box 831		
(c) City, State, and ZIP Code Mc Lean VA 22101		

DESIGNATION OF OTHER AUTHORIZED COMMITTEES

(Including Joint Fundraising Representatives)

8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full) Winning Women 2016		
(b) Address (number and street) 228 S Washington St Ste 115		
(c) City, State, and ZIP Code Alexandria VA 22314		

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Signature of Candidate Comstock, Barbara, J, Honorable, [Electronically Filed]	Date 11/22/2016
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NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.

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FORM 2S - STATEMENT OF CANDIDACY (Supplemental Page)

FEC Form 2 (Rev. 02/2003)

Page 2 / 3

DESIGNATION OF OTHER AUTHORIZED COMMITTEES**[ADDITIONAL]**

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE:This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

Comstock Victory Fund

(b) Address (number and street)

PO Box 9891

(c) City, State and ZIP Code

Arlington

VA

22219

DESIGNATION OF OTHER AUTHORIZED COMMITTEES**[ADDITIONAL]**

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE:This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

Patriot Day II 2015

(b) Address (number and street)

PO Box 9891

(c) City, State and ZIP Code

Arlington

VA

22219

DESIGNATION OF OTHER AUTHORIZED COMMITTEES**[ADDITIONAL]**

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE:This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

Republicans Inspiring Success & Empowerment Project

(b) Address (number and street)

PO Box 2485

(c) City, State and ZIP Code

Springfield

VA

22152

FORM 2S - STATEMENT OF CANDIDACY (Supplemental Page)

FEC Form 2 (Rev. 02/2003)

Page 3 / 3

DESIGNATION OF OTHER AUTHORIZED COMMITTEES**[ADDITIONAL]**

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE:This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

Winning Women Victory Committee

(b) Address (number and street)

228 S Washington St
Ste 115

(c) City, State and ZIP Code

Alexandria

VA

22314

DESIGNATION OF OTHER AUTHORIZED COMMITTEES**[ADDITIONAL]**

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE:This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

Friends of Winning Women 2016

(b) Address (number and street)

228 South Washington
Suite 115

(c) City, State and ZIP Code

Alexandria

VA

22314

DESIGNATION OF OTHER AUTHORIZED COMMITTEES**[ADDITIONAL]**

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE:This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

Patriot Victory 2016

(b) Address (number and street)

320 First Street SE

(c) City, State and ZIP Code

Washington

DC

20003